

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 03/04/2015
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145661	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 02/20/2015
NAME OF PROVIDER OR SUPPLIER JACKSON SQ SKL NRSNG & LIVING			STREET ADDRESS, CITY, STATE, ZIP CODE 5130 WEST JACKSON BOULEVARD CHICAGO, IL 60644		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
F 000	INITIAL COMMENTS	F 000			
F 323 SS=G	<p>Complaint Investigation 1580729/IL74888- No Deficiency</p> <p>Incident Investigation IRI of 2/15/2015 - IL75018 -Refer to F323 483.25(h) FREE OF ACCIDENT HAZARDS/SUPERVISION/DEVICES</p> <p>The facility must ensure that the resident environment remains as free of accident hazards as is possible; and each resident receives adequate supervision and assistance devices to prevent accidents.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, record review and interview the facility failed to supervise and monitor a resident with a known unsafe smoking behavior. This failure applies to one of three residents (R6) reviewed for behaviors, in a sample of eight. As a result, R6 while smoking a cigarette during oxygen therapy, sustained facial burns and smoke inhalation Findings include: Medical record for R6 noted 54 year old admitted to facility on 7/8/2014 with Diagnoses to include Schizophrenia, Chronic Airway Obstruction and Alcohol Dependence. A Minimum Data Set (MDS) assessment dated 7/15/2014 for R6 scored 7 out of a possible 15 on the Brief Intelligence Mental Status (BIMS). This indicated R6 had a impaired cognitive status.</p>	F 323			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 323	<p>Continued From page 1</p> <p>Physician's Order sheet(POS) of 7/14/2014 for R6 had an order for Oxygen at 3 liters per nasal cannula.</p> <p>On 2/18/2015 at 2:30PM and on 2/19/2015 at 10:00AM, residents were seen smoking outside the facility's building with staff supervision. R6's smoke risk assessment done upon admission 7/11/2014 scored 0-9 indicative of a safe smoker.</p> <p>The following was documented in R6's record regarding the resident behavior and facility's actions:</p> <p>-On 11/4/2014 medical record for R6 documented social worker spoke with R6 in relation to report of him smoking in his room.</p> <p>Actions post Smoking event by facility included counseling, education and signing of smoking contract by R6. Along with the above action by facility, smoking materials were removed from R6's room. Care plan noted education for R6.</p> <p>On 11/19/2014 at 10:35AM, Z2(Psychiatrist) documented (R6) smokes in room with oxygen and with interdisciplinary observations (R6) can be impulsive and forgetful. Behavior for R6 noted with impaired judgment and impaired insight.</p> <p>-On 1/23/2015 at 13:56PM, nurse wrote, " nurse manager informed per staff housekeeper resident smoking in room with oxygen present. Upon entering room, resident sitting on side of bed and stated that he was smoking. Writer provided education regarding hazard of smoking while oxygen in use and /or present. Resident stated, " it won't happen again that was my last one anyway " .</p> <p>Actions post smoking event by facility on 1/23/2014 included education, and daily discussions with administrator along with search for alternative placement. No new intervention was documented in care plan to ensure behavior</p>	F 323			

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F 323	<p>Continued From page 2</p> <p>was not repeated.</p> <p>No other smoke assessment was done after two occurrences of smoking in room by R6. According to E1(Administrator) the smoke risk assessment is done yearly.</p> <p>-An incident report of 2/15/2015 at 11:30PM documented, CNA (certified nurse aide) noted black around resident's nose and mouth. R6 stated "was trying to take a quick hit off his cigarette and it blew up in his face." The resident was assessed and noted with burns to resident's nose, lips, hair and blisters forming on his jaw. R6's nurses notes for 2/16/2015 at 11:03AM noted, "Spoke with charge nurse at hospital, made aware that resident was admitted with facial burns and smoke inhalation. "</p> <p>On 2/18/2015 at 10:00AM, E1 (Administrator) said constant education was provided for R6 in relation to smoking rules. When asked what was done by the facility after the first and even after the second occurrence of (R6) smoking in room with oxygen present, E1 said a smoking contract was signed by R6 on both occasions and alternative placement was sought. E1 also said it was one person with two occurrences. According to E1 residents could have smoked in designated areas between 7:00AM and 10:00PM daily. No additional policy regarding supervision of residents smoking was presented, when requested by the surveyor.</p> <p>Upon request the facility failed to provide the surveyor with any written interventions regarding monitoring and supervising R6's non-compliant behavior to the facility's smoking policy implemented between 7/8/2014 and 2/15/2015.</p> <p>On 2/19/2015 at 1:00PM, E1 presented new smoking supervision process which according to him was initiated after the incident of 2/15/2015.</p> <p>On 2/20/2014 at 11:55AM, Z2 (psychiatrist) said</p>	F 323			

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F 323	Continued From page 3 she could not remember when she saw R6 and she could not have done anything about his smoking in room. According to her, the facility had the responsibility to prevent the resident from obtaining cigarettes if they did not want him to smoke in room. Smoking Policy for facility documented "Smoking is confined to designated areas of the building and at designated times". and " Residents are allowed to smoke in designated places, never in their rooms or hallways". On 2/18/2015 at 9:30AM and 2/19/2015 at 1:30PM, tour of facility noted no smell of cigarette smoke. Random check of residents' drawer in room with E2(Director of Nurses, DON) noted no cigarettes or lighter.	F 323			